## **Proposal Cover Sheet (New and Existing Operators)**

#### **Applicant Information**

COMPLETE THIS PAGE ONLY ONCE REGARDLESS OF THE NUMBER OF SCHOOLS PROPOSED.

Name of applicant organization: Mississippi Preparatory School

Primary contact person: Yvonne Adkins

Mailing address:

Street/PO Box: 21100 Southgate Park Blvd

City: Maple Heights State: Ohio Zip: 44137

Phone Number: Day: 216-513-8626 Evening: 216-513-8626

Email: yadkins@icanschools.org

Names, roles, and current employment of all persons on applicant team (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Jason Stragand	Chief Academic Officer and Co-founder, I CAN SCHOOLS	Chief Academic Officer, I CAN SCHOOLS
	TOAN SCHOOLS	I CAN SOLIOOLS
		As the Chief Academic Officer of
		the education service provider,
		Jason will guide the school
		leadership team in delivering a successful academic program.
Christopher David Massa	Chief Fiscal Officer, I CAN SCHOOLS	Chief Fiscal Officer,
Officiopher Bavia Massa	Official Scale Officer, 1 Over Octave	Mississippi Preparatory School
		mississippi i reparatory concer
		Dave will work with the school
		leadership and oversee the
		financial operations in a fiscally
		responsible manner in order to
		achieve strong results while maintaining overall sustainability,
		and sound operations.
Yvonne Adkins	Executive Director of Governmental	Executive Director of Governmental
	Relations and Strategic Partnerships, I	Relations and Strategic
	CAN SCHOOLS	Partnerships,
		I CAN SCHOOLS
		Wasana a will was do with the access the
		Yvonne will work with the executive team and founding board to build
		positive community and authorizer
		relationships while setting the
		conditions to ensure compliance is
		established and maintained at the
		school and governance level.

Linda P	Peavy	Director of Gran	nts Adı	ministrat	ion and	Director of	of Grants	Adminis	stration
		Proposal Devel	opmer	nt, I CAN		and Proposal Development,			nt,
		SCHOOLS				I CAN SO	CHOOLS		
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							mber of the		
							rovider, Li school boa		
							ip team to		
							funding c		•
						the school	•	P P - 1 1 1 1 1	
All X W pe If so, ide	Do any of the following describe you eeks approval for multiple campuses ur lready operates schools elsewhere in the fill contract or partner with an education ending applications and school openings. Entify the provider:  X This provider already the applicant meets the definition of an element of the applicant meets the definition of an element of the contract with a third-party ediroviders. An ESP is any third-party entities chool's governing board.  S applicant team have charter school tates?  X Yes	nder a single charter use US. service provider. eady operates schexisting operator, the ucation service provides confidenced to the confidence of the confid	er.  If yes, in  ools in  he appl  ovider (  mprehe	this state licant mus (ESP), the nsive edu	rovider's portfolio in e or elsewhere i st complete the e applicant must ucation manager	n answering n the US. Existing o complete ment servi	perator apperator apperator apperator apperator	olication 1 3 for E hool via	. If the ducation
State	Authorizer		Pro	posed Sc	chool Name		Applicat Due Da		Decision Date
TN	Metro Nashville Public Schools	Tenness	see Co	llege Pr	eparatory Sch	ool	April 1		une 16
	motion reactivities and additional additional and additional		300 00	mogo i i	oparatory com	-	7 (01		G110 10
school y	s applicant team have new schools of ears? X Yes	r campuses sche	eduled	to open	in the United S	States in	the next tv	vo	
	Planned School Name				City			State	Opening Date
Indiana	polis Mayor's Office,			Indiana	polis			IN	August
Office of	of Education and Innovation								2017
	_	r campuses appr ]No	roved l	out sche	duled to open i	in additio	onal years'	?	
500, 00111	piete the table below. Againg lines as neeged								
	plete the table below, adding lines as needed. <b>Authorizer</b>		# of S	Schools		City(	s)		State
Indiana			# of S	Schools	Indianapolis	City(	s)		State IN
Office of	Authorizer		# of \$	Schools	Indianapolis	City(	s)		

#### **School Information**

COMPLETE THIS PAGE FOR EACH SCHOOL/CAMPUS INCLUDED IN THIS PROPOSAL. Duplicate as needed.

Proposed School/	Campus Name			Grades se		Grades se capaci	
Mississippi Preparatory School 1				K-8		K-8	
	Proposed Loc	ation					
School District: Identify the school district where the charter school will be located.		Jacks	on Public	Schools			
Address of identified facility if applicable:							
Projected Demographic Information		%FRL:	91	%SpEd:	10	%ELL:	1
	Model/Specialty (check	ck all that apply)					
☐ Alternative       ☐ Career and Tech         ☐ Arts       X College Prep         ☐ Blended Learning       ☐ Other (list):	hnical Education	☐ Disability☐ Language☐ Military	( <i>list</i> ): e Immersio	n [	Monte		
Proposed Principal/Head of School (if ki	nown)						
Current employment: Phone Number: Day: Email:			Evening:				

### **Campus Enrollment Projection:**

Academic Year	Planned #	Maximum #	Grade Levels
(specify)	of Students	of Students	Served
Year one	300	300	K-8
Year two	330	330	K-8
Year three	360	360	K-8
Year four	390	390	K-8
Year five	420	420	K-8
At Capacity	420	420	K-8

### **School Information**

COMPLETE THIS PAGE FOR EACH SCHOOL/CAMPUS INCLUDED IN THIS PROPOSAL. Duplicate as needed.

Proposed School	Campus Name			Grades se		Grades se capaci	
Mississippi Preparatory School 2				K-8		K-8	
	Proposed Lo	cation					
School District: Identify the school district where the charter school will be located.		Jacks	son Public	Schools			
Address of identified facility if applicable:							
Projected Demographic Information		%FRL:	91	%SpEd:	10	%ELL:	1
	Model/Specialty (che	eck all that apply)					
☐ Alternative       ☐ Career and Tec         ☐ Arts       X College Prep         ☐ Blended Learning       ☐ Other (list):	hnical Education	☐ Disability☐ Languag☐ Military	/ (list): le Immersio	n [	Monte	essori <i>I</i> I	
Proposed Principal/Head of School (if k Name of proposed candidate: Current employment:	nown)	·					
Phone Number: Day:Email:			Evening: _				

# **Campus Enrollment Projection:**

Academic Year	Planned #	Maximum #	Grade Levels
(specify)	of Students	of Students	Served
Year one	300	300	K-8
Year two	330	330	K-8
Year three	360	360	K-8
Year four	390	390	K-8
Year five	420	420	K-8
At Capacity	420	420	K-8

### **School Information**

COMPLETE THIS PAGE FOR EACH SCHOOL/CAMPUS INCLUDED IN THIS PROPOSAL. Duplicate as needed.

Proposed School/	Campus Name			Grades se year o		Grades se capaci	
Mississippi Preparatory School 3				K-8		K-8	
	Proposed Loc	cation					
School District: Identify the school district where the charter school will be located.		Jacks	son Public	Schools			
Address of identified facility if applicable:							
Projected Demographic Information		%FRL:	91	%SpEd:	10	%ELL:	1
	Model/Specialty (che	ck all that apply)					
☐ Alternative       ☐ Career and Tech         ☐ Arts       X College Prep         ☐ Blended Learning       ☐ Other (list):	hnical Education	☐ Disability ☐ Languag ☐ Military	/ (list): le Immersio	n [	☐ Monte		
Proposed Principal/Head of School (if kind Name of proposed candidate:  Current employment:	nown)						
Phone Number: Day: Email:			Evening:				

# **Campus Enrollment Projection:**

Academic Year (specify)	Planned # of Students	Maximum # of Students	Grade Levels Served
Year one	300	300	K-8
Year two	330	330	K-8
Year three	360	360	K-8
Year four	390	390	K-8
Year five	420	420	K-8
At Capacity	420	420	K-8

### LETTER OF INTENT

This letter of intent (LOI) serves to provide a formal notice to the Mississippi Charter School Authorizer Board (MCSAB) regarding our intention to submit a proposal for opening a charter school.

Name of applicant organization:	Mississippi Preparatory School				
Primary contact person:	Yvonne Adkins				
Mailing address: Street/PO Box: 21100 Southgate P	ark Blvd				
city: Maple Heights		State:	Ohio	Zip:	44137
	6.513.8626	Evening:	216.513.8626		
Email: yadkins@icanschools.or	rg				
We plan to apply as a:					
☐ New operator	X Existing operator		Conversi	ion oper	rator
Do any of the following describe y  Seeks approval for multiple ca			ses you will prop	ose?	
Already operates schools else		1.			
X Will contract or partner with ar	n education service provider.				
If so, identify the provider:					
Y This provid	er already operates schools in	this state o	r elsewhere in the	US.	

Provide the names of all members of the applicant team (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Jason Stragand	Chief Academic Officer and Co-founder, I CAN SCHOOLS	Chief Academic Officer, I CAN SCHOOLS
		As the Chief Academic Officer of the education service provider, Jason will guide the school leadership team in delivering a successful academic program.
Christopher David Massa	Chief Fiscal Officer, I CAN SCHOOLS	Chief Fiscal Officer, I CAN SCHOOLS and Mississippi Preparatory School
		Dave will work with the school leadership and oversee the financial operations in a fiscally responsible manner in order to achieve strong results while maintaining overall sustainability, and sound operations.

Yvonne Adkins	Executive Director of Governmental Relations and Strategic Partnerships, I CAN SCHOOLS	Executive Director of Governmental Relations and Strategic Partnerships, I CAN SCHOOLS
		Yvonne will work with the executive team and founding board to build positive community and authorizer relationships while setting the conditions to ensure compliance is established and maintained at the school and governance level.
Linda Peavy	Director of Grants Administration and Proposal Development, I CAN SCHOOLS	Director of Grants Administration and Proposal Development, I CAN SCHOOLS
		As a member of the education service provider, Linda will work with the school board and school leadership team to seek, develop, and write funding opportunities for the school.

Provide the names of all members of the proposed governing board of the school (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School
Sam Peters	Broker and VP of Sales and Leasing, Peters Real Estate Jackson, MS	Board member
La'Kitha W. Hughes		
Gary D. Adams	Pastor, Cathedral AME Zion Church Jackson, MS	Board member
Monifa Beal-Horton	Family Nurse Practitioner, Veterans Administration Medical Center Community Wellness Jackson, MS	Board member

Provide the names of all members of the proposed leadership team of the school (add lines as needed):

Full Name	Current Job Title and Employer	Position with Proposed School

COMPLETE THIS PART FOR EACH SCHOOL/CAMPUS YOU INTEND TO PROPOSE. Duplicate as needed.

Proposed School/Campus Name	Opening year	Grades served vear one	Grades served a capacity
Mississippi Preparatory School 1	2017	K-8	K-8

Mississippi Preparatory School 2 2018				K-8	
Mississippi Preparatory School 3 2019				K-8	
	Pi	roposed Location			
School District: Identify the school district where the char- located.	Jackson Public Schools for	Jackson Public Schools for all locations			
	Model/S	pecialty (check all that apply)			
Alternative	Career and Technical Ed	ducation Disability (list):	☐ Monte		
Arts X Blended Learning	College Prep	Language Immersion	☐ STEM	Λ	
Diended Learning	Other (list):	Military sed School Description			
	Fropos	ied deliooi bescription			
Provide the mission statement of the proposed school.	The mission of Mississippi Preparatory School is to prepare students for a college preparatory high school that will ensure success and graduation from a four-year college.				
In 100 words or less, briefly describe the instructional focus of the proposed school.	education to underrep program of proven cur to life changing succe MPS prepares studen extended school day a gaps. Chosen college differentiates the educ	ry School (MPS) will close the achieved bresented students. Our model is based presented students. Our model is based presented students. Our model is based as a second part of the second present of	ed upon the I CA ental engagement lass was accept en. Individualize school tutoring d lessons, and of diate, enhance	AN SCHOOLS ent, which has led ted into college.  d lesson plans, fills academic direct instruction	
applicant team against the legal of Mississippi.  We further understand that in order 10, 2016.  I certify that I have the authority to realizing that any misrepresentatic contact person for the application organization.  Yvonne Adkins, Executive Name, Role with Applicant Organization.	eligibility requirements to deer to be considered in this submit this LOI and that on could result in disqual is so authorized to serve the Director of Government anization	anying documentation, the MCSAB will e determine whether we are eligible to hold is RFP cycle, we must submit a complete all information contained herein is complification from the application process. The as the primary contact for this application tal Relations and Strategic Partnerships	proposal by 3pm lete and accurate e person named	state of CST on May e, as the	
Chonce	Adkus	/	March 8, 2	2010	
Signature ()			Date		